

Apr-13-04

APR 13 2004

From-Affymetrix, Inc.

408 731 5392

T-044 P.005/011 F-495

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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 3522.2

First Named Inventor Matsuzaki

COMPLETE IF KNOWN

Application Number 10/681,773

Filing Date 10/07/2003

Group Art Unit TBA

Examiner Name TBA

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR GENOTYPING POLYMORPHISMS IN HUMANS

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

10/07/2003

as United States Application Number or PCT International

Application Number 10/681,773 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/417,190 60/470,475	10/08/2002 05/14/2003	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the

Patent and Trademark Office connected therewith ☒ Customer Number 22696  Place Customer Number Bar Code Label here
OR
☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

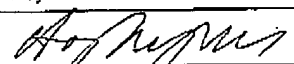
☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.Direct all correspondence to: ☒ Customer Number or Bar Code Label 22696 OR ☒ Correspondence address below

Name			
Address			
Address			
City	State	CA	ZIP
Country	Telephone		Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Hajime	Matsuzaki

Inventor's Signature		Date	2-25-04
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Residence: City	Palo Alto	State	CA	Country	US	Citizenship	Japan
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Post Office Address	4078 Middlefield Road
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Post Office Address	
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City	Palo Alto	State	CA	ZIP	94303	Country	US
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☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

(Page 2 of 2)

PTO/SB/02A (08-03)

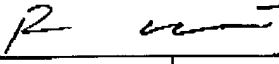
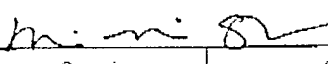
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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet

Page ____ of ____

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Rui		Mei	
Inventor's Signature 		Date 03/17/2009	
Residence: City	Santa Clara	State	CA
Country	US	Citizenship	US
Mailing Address 234 Redonovan Drive			
Mailing Address			
City	Santa Clara	State	CA
ZIP	95051	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mei-Mei		Shen	
Inventor's Signature 		Date 04/09/2009	
Residence: City	Cupertino	State	CA
Country	US	Citizenship	US
Mailing Address 20167 Las Ondas Way			
Mailing Address			
City	Cupertino	State	CA
Zip	95014	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Giulia C.		Kennedy	
Inventor's Signature		Date	
Residence: City	San Francisco	State	CA
Country	US	Citizenship	US
Mailing Address 360 Castaneda Ave			
Mailing Address			
City	San Francisco	State	CA
Zip	94118	Country	US

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Apr-13-04 02:51pm From-Affymetrix, Inc.

Apr-08-04 10:15am From-Affymetrix, Inc.



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T-044 P.008/011 F-495

T-038 P.001/003 F-465

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☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (c))
required)

Attorney Docket Number

3522.2

First Named Inventor

Malsuzaki

COMPLETE IF KNOWN

Application Number

10/681,773

Filing Date

10/07/2003

Group Art Unit

TBA

Examiner Name

TBA

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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the specification of which

(Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

10/07/2003

as United States Application Number or PCT International

Application Number

10/681,773

and was amended on (MM/DD/YYYY)

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

I hereby claim the benefit under 35 U.S.C. 110(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.
60/417,180 60/470,475	10/08/2002 05/19/2003	

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application number(s) and date(s) of supplemental priority date sheet PTO/SB/01B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to conduct all business in the Patent and Trademark Office connected therewith

☒ Customer Number

22986

Place Customer Number Bar Code Label here

OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

☒ Customer Number or Bar Code Label

22986

OR ☒ Correspondence address below

Name

Address

Address

City

State

CA

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Hajime

Masuzaki

Inventor's Signature

Date

Residence: City

Palo Alto

State

CA

Country

US

Citizenship

US

Post Office Address

4078 Middlefield Road

Post Office Address

City

Palo Alto

State

CA

ZIP

94303

Country

US

☐ Additional inventors are being named on the _____ supplemental Additional Inventors sheet(s) PTO/SB/02A attached hereto.

(Page 2 of 2)

Apr-13-04 02:51pm From-Affymetrix, Inc.
Apr-08-04 10:16am From-Affymetrix, Inc.

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408 731 5392

T-044 P.010/011 F-495
T-038 P.003/003 F-485

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet	Page _____ of _____
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Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Rui		Mai					
Inventor's Signature		Date					
Residence: City	Santa Clara	State	CA	Country	US	Citizenship	US
Mailing Address							
234 Redwood Drive							
Mailing Address							
City	Santa Clara	State	CA	ZIP	95051	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Mo-Mei		Shen					
Inventor's Signature		Date					
Residence: City	Cupertino	State	CA	Country	US	Citizenship	US
Mailing Address							
20167 Las Orcas Way							
Mailing Address							
City	Cupertino	State	CA	Zip	95014	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Ghila C.		Kennedy					
Inventor's Signature		Date					
<i>Ghila C. Kennedy</i>		4/9/04					
Residence: City	San Francisco	State	CA	Country	US	Citizenship	US
Mailing Address							
380 Castaneda Ave							
Mailing Address							
City	San Francisco	State	CA	Zip	94116	Country	US

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.83. The information is required to obtain or retain a benefit by the public when it is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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